

PART B - FEE(S) TRANSMITTAL

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25686 7590 06/05/2008

CARGILL & ASSOCIATES, P.L.L.C.
56 MACOMB PLACE

09/09/2008 HUNGBE 00000012 09720576

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Barleen Greiner (Depositor's name)
Barleen Greiner (Signature)
 09-05-2008 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/720,576

12/22/2000

Steven G. Smarsh

TRUTECH P-302

3553

TITLE OF INVENTION: GRINDING MACHINE, COMPUTER SOFTWARE TO OPERATE SUCH A MACHINE, AND THEIR USES THEREFOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

YES

\$720

\$0

\$0

\$720

09/05/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
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MORGAN, EILEEN P

3723

451-005000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. _____
 2. **Cargill & Associates, PLLC**
 3. **Lynn E. Cargill, Attorney**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

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- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date

Registration No.

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